FOR INSTRUCTIONS, SEE BACK OF FORM	The second second		
CHECK UNE:	ra de la casa de la ca Casa de la casa de la c	FORM	STATEMENT
☐ This is an initial* Statement of Organization ☐ This is an amended* Statement of Organization **An initial Statement of Organization		DR-1 (Rev. 04/2008)	OF ORGANIZATION
OU IIIIII DINIEMENT OF OPPOPUZATION much be EU 1 111 11 11 11 11 11 11 11 11 11 11 11	1112.1.7 6.1.2	For Office Use	Only
making expenditures, or incurring indebtedness exceeding \$750. Amendra a change. Penalties may be imposed for late-fied Statements of Organization	mmittee's acceptifig contributions, nents must be filed within 30 days of	Comm. #	
committee that exceeds \$750 in activity for another office about file	tion. A candidate with an open	Indexed Audited	
DR-1 disclosing information concerning the campaign for the new office so	D days either a new or amended	Computer	
COMMITTEE NAME ↓ ↓ (A candidate's committee must include the candidate's last name in the name of the committee.)			
IMPORTANT: Indicate type of committee you are reporting for:			
(5) County Candidate (6) City Consider (7) County Candidate (7) Statewide PAC (3) State Party (4) County Central Committee			
(including committee involved in multiple city/county ballot issues)			
Name + + (1) - (2)	COMMITTEE CHAIR (manda	tory except for a ca	andidate's committee)
- Pat Essing	Name + Mark N	ECSIA	
City State 7: 0 :	Mailing Address $\downarrow \downarrow P() f()$	x 33	
Manson IA 50563	City, State + Zip Code + +-	TA 505	703
Phone (7/2) 469 22/8	Phone (7/2) 469 22		
e-Mail e-Mail			
INDICATE PURPOSE OF COMMITTEE - Check One Box Adv. Comment or description:	ocate for/against candidate(s) Adv	vocate for ballot issue	e(s)
All Candidates Enter:	County/Local Candidates an	Monate anainst hallot	iceuo(a)
Office Sought: County Supervisor			mittees Enter:
Political Party (if applicable) Republican	County: (If active in multiple ballot issue	elections, attach lis	t of counties
District: One	Date of Election://		
Year Standing for Election: 2008 Bank Account Name (must match committee name)			
, , , , ,	Candidate name & Address or Par	rent Entity (PACs, if	applicable),
Mark Essing Campaign Name of Financial Institution/type of Account	mark W		
Name of Financial Institution/type of Account	Mailing Address _ ↓ ↓	Essing	
Mailing Address State Bush Po Box 3.3			
Mailing Address 1 1001 main St.	City ↓ ↓ §	State ↓ ↓	Zip ↓ ↓
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	<u> Manson</u>		0563
manson IA 50563	Phone (7/2) 469 2	218	
	e-Mail		
STATEMENT OF AFFIRMATION: By filing this document the committee affir	ms the following:	_	
1. The committee and all persons connected with the committee understand that rules in Chapter 351 of the Iowa Administrative Code.	they are subject to the laws in lowa Code	chapters 68A and 68I	B and the administrative
 That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosi subjects the candidate or chairperson (in the case of committees other than a can imposition of other criminal and civil sanctions. 			
 That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the materials except for those items exempted by statute or rule. A committee that wis does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form 	in lieu of filing this form.	poses of using the shi	orter "paid for by" and
 That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the issue PACs. 	receipt of corporate contributions by all co	ommittees except for	statewide and local ballot
5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351, 4.25			
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of			
Clev Essie		11-500	
Signature of Treasurer		Date Signed	
Mark N. Essura		Date Signed 1 (- 5 - 0	8
Signature of Candidate, OR, for all other committees, Chairperson		Date Signed	<u> </u>

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